

CLAIMS ONLY						Application Number <i>101688240</i>	Filing Date			
						Applicant(s)				
						* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend				
1	1		1							
2		1		1						
3		1		1						
4		1		1						
5		1		1						
6		1		1						
7		1		1						
8		1		1						
9		1		1						
10		1		1						
11		1		1						
12		1		1						
13		1		1						
14		1		1						
15		1	1							
16		1		1						
17		1		1						
18		1		1						
19	1		1							
20		1		1						
21		1		1						
22		1		1						
23	1		1							
24		1		1						
25		1		1						
26		1		1						
27		1		1						
28	1		1	2						
29		1		1						
30		1		1						
31										
32										
33										
34										
35										
36										
37										
38										
39										
40										
41										
42										
43										
44										
45										
46										
47										
48										
49										
50										
Total Indep	24		1	6						
Total Depend	26	26	24							
Total Claims	30		30							